Attorney's Docket No. 010830-119

3	IN THE UNITED STATES PATEN	
In re P	atent Application of) RFC
Francis PRUCHE et al.		Group Art Unit: 1617 Examiner: Mojdeh Bahar Confirmation No.: 6986 RECEIVED DEC 1 8 2003 TECH CENTER 1600/2900
Applica	ation No.: 09/915,353	Examiner: Mojdeh Bahar TFCL 2 8 2003
Filed:	July 27, 2001	Confirmation No.: 6986
For:	GLUCOSYLATED HYDROXYSTILBENE COMPOUNDS FOR TREATING SKIN CONDITIONS)	
	AMENDMENT/REPLY TRA	ANSMITTAL LETTER
P.O. Bo	ssioner for Patents ox 1450 Iria, VA 22313-1450	
Sir:		
Enc	closed is a reply for the above-identified pater	at application.
[X]	A Petition for Extension of Time is also en	closed.
.[].	A Terminal Disclaimer and the [] \$55.00 (C.F.R. § 1.20(d) are also enclosed.	2814) [] \$110.00 (1814) fee due under 37
[X]	Also enclosed is/are Exhibit A, Regev-Sho	oshani et al. (Biochem. J., 374:157-163(2003).
[]	Small entity status is hereby claimed.	
[]	Applicant(s) requests continued examination [] \$385.00 (2801) [] \$770.00 (1801) fee of	n under 37 C.F.R. § 1.114 and enclose the lue under 37 C.F.R. § 1.17(e).
	[] Applicant(s) requests that any previous entered. Continued examination is required above.	sly unentered after final amendments <u>not</u> be puested based on the enclosed documents
	[] Applicant(s) previously submitted, requested.	on, for which continued examination is
	[] Applicant(s) requests suspension of act does not exceed three months from the 37 C.F.R. § 1.103(c). The required fe	ion by the Office until at least, which filing of this RCE, in accordance with e under 37 C.F.R. § 1.17(i) is enclosed.

Amendment/Reply Transmittal Letter Application No. 09/915,353 Attorney's Docket No. 010830-119 Page 2

	AMENDED CLAIMS	1000/2900
[]	No additional claim fee is required. An additional claim fee is required, and is calculated as shown below.	ELECH CENTER 1600/0
[73]	No additional claim lee is required.	DEC 1 8 2003
ΓXI	No additional claim fee is required	DEO
[]	A Request for Entry and Consideration of Submission under 37 C.F.I (1809/2809) is also enclosed.	R. § 1.12 PECFILE.

		AMENDED	CLAIM	S	
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADD'L FEE
Total Claims	32	MINUS 32 =	0	× \$18.00 (1202) =	0
Independent Claims	12	MINUS 12 =	0	× \$86.00 (1201) =	0
If Amendment adds m	ultiple depend	ent claims, add \$29	0.00 (1203)		
Total Claim Amendment Fee					0
If small entity status is	claimed, sub	tract 50% of Total (Claim Amendi	ment Fee	

[] A check in the amount of \$ is enclosed for the fee due.
[] Charge \$to Deposit Account No. 02-4800.
The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16,
1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to
Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: <u>December 12, 2003</u>

Jennifer A. Topmiller, Ph.D Registration No. 50,435

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620